FORM D

State:



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

INIFORM	LIMITED	OFFERING	EXEMPTION

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OMB APPROVAL

OMB Number: 3235-0076 April 30, 2008

Expires: Estimated average burden hours per response . . . 16.00

SEC USE ONLY					
Prefix		Serial			
DAT	E RECEIV	ED.			
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UNIFORM LIMITED OFFERING EXEMP	TION
Name of Offering ( check if this is an amendment and name has changed, and indicate cleampbell Timber Fund II, L.P. limited partnership interests	hange.)
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Sc	ction 4(6) ULOE
Type of Filing: New Filing	W. C.
A. BASIC IDENTIFICATION DATA	, , , , , , , , ,
Enter the information requested about the issuer	WAR 1 3 2001
Name of Issuer ( check if this is an amendment and name has changed, and indicate cha Campbell Timber Fund II, L.P.	× × × × × × × × × × × × × × × × × × ×
Address of Executive Offices: (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
c/o Campbell Timber Fund II GP, LLC, One S.W. Columbia, Suite 1700, Portland, OR 97258	(503) 275-9675
Address of Principal Business Operations: (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same	Telephone Number (Including Area Code)
Brief Description of Business: invest in timber	
business trust limited partnership, to be formed	er (please specify):  MAR 2 3 2007
Actual or Estimated Date of Incorporation or Organization:    Month Year	Actual Estimated on for State: DE THOMSON
GENERAL INSTRUCTIONS	
Federal:  Who Must File: All issuers making an offering of securities in reliance on an exemption under Regict seq. or 15 U.S.C. 77d(6).  When To File: A notice must be filed no later than 15 days after the first sale of securities the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is receive if received at that address after the date on which it is due, on the date it was mailed by United St.	in the offering. A notice is deemed filed with d by the SEC at the address given below or.
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washir	ngton, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must signed must be photocopies of the manually signed copy or bear typed or printed signature	be manually signed. Any copies not manually
Information Required: A new filing must contain all information requested. Amendments needing, any changes thereto, the information requested in Part C, and any material changes from A and B. Part E and the Appendix need not be filed with the SEC.	
Filing Fee: There is no federal filing fee.	

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; · Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Campbell Timber Fund II GP, LLC **Business or Residence Address** (Number and Street, City, State, Zip Code) One S.W. Columbia, Suite 1700, Portland, OR 97258 Check Box(es) that Apply: Executive Officer □ Promoter Beneficial Owner ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Gilleland, John (Number and Street, City, State, Zip Code) Business or Residence Address One S.W. Columbia, Suite 1700, Portland, OR 97258 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Renecker, Stanley **Business or Residence Address** (Number and Street, City, State, Zip Code) One S.W. Columbia, Suite 1700, Portland, OR 97258 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Combs, Gary **Business or Residence Address** (Number and Street, City, State, Zip Code) One S.W. Columbia, Suite 1700, Portland, OR 97258 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer Director ☐ General and/or

(Number and Street, City, State, Zip Code)

Managing Partner

Full Name (Last name first, if individual)

**Business or Residence Address** 

					B. INF	ORMAT	ION ABO	UT OFFI	ERING				
1. Has	the issue	r sold, or c	loes the is	suer inten	d to sell, to	o non-acci	edited inv	estors in t	his offerin	<u>o</u> ?			Yes No
							lumn 2, if			_			
2. Wh	at is the m	inimum ir						_			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.41.**1.1**1**1**1**1	N/A
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Busines	s or Resid	dence Add	ress (Num	ber and S	treet, City	. State, Zij	p Code)		N/A				
Name o	f Associat	ted Brokei	or Dealer	<u> </u>		N/A							<del> </del>
States i	n Which F	Person Lis	ted Has So	olicited or	Intends to	Solicit P	urchasers						
(Check "All States" or check individual States)									All States				
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Full Na	me (Last i	name first.	if individ	lual)		N/A							
Busines	s or Resid	dence Add	ress (Nun	ber and S	treet, City	. State, Zip	p Code)		N/A				
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt ..... Equity ..... Common Preferred Convertible Securities (including warrants)..... Partnership Interests \$500,000,000 \$205,250,000 \_\_\_\_\_ Other (Specify) Total..... \$500,000,000 \$205,250,000 Answer also in Appendix, Column 3, if filing under ULOE 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases of the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors ..... \$205,250,000 Non-accredited Investors.... \$0 Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Type of Offering Security Sold Rule 505......N/A..... Rule 504......N/A..... Total ..... Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees □ \$ □ \$\_\_\_ Printing and Engraving Costs ..... **■** \$675,000 Legal Fees **⊠** \$\_\_\_ Accounting Fees ..... Engineering Fees □ \$\_\_\_\_\_

Sales Commissions (specify finders' fees separately)

Other Expenses (identify)

Total .....

□ \$\_\_\_\_\_

□ \$ \_\_\_\_\_

**S** 675,000

	Fimber Fund II GP, LLC, General	Managing Member			
	gner (Print or Type)	Pite of Signer (Print or Type)	12.12	07	
Issuer (Print	t or Type) Fimber Fund II, L.P.	Signature	Date	. 7	
following si of its staff, t	gnature constitutes an undertaking by the ishe information furnished by the issuer to a	y the undersigned duly authorized person. If ssuer to furnish to the U.S. Securities and Exch ny non-accredited investor pursuant to paragrap	ange Commission th (b)(2) of Rule	n, upon w	
		D. FEDERAL SIGNATURE			
	Total Payments Listed (column totals adde	d)	🗵	\$ <u>204,5</u>	75,000_
	Column Totals			🛛	\$ <u>204,575,00</u>
			<u> </u>	\$	
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	Acquisition of other businesses (including this offering that may be used in exchange	for the assets or securities of			•
		and facilities	🗌 \$	□	<b>S</b>
	Purchase, rental or leasing and installation	🗆 <b>\$</b>	□	\$	
	Purchase of real estate	🗆 \$	□	<b>S</b>	
	Salaries and fees		Paymen Office Director Affilia	rs, s, &	Payments Others
be u furni payn	sed for each of the purposes shown. If this han estimate and check the box to the	s proceeds to the issuer used or proposed to the amount for any purpose is not known, he left of the estimate. The total of the proceeds to the issuer set forth in response			
5. India	• •	e issuer."			

